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Bib Data Sheet

CONFIRMATION NO. 4494

|  |   |                                       |  |   |                                    |
|--|---|---------------------------------------|--|---|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/501,544   | <b>FILING OR 371(c)<br/>DATE</b><br>05/23/2005<br><b>RULE</b>   | <b>CLASS</b><br>702                   | <b>GROUP ART UNIT</b><br>2857  | <b>ATTORNEY<br/>DOCKET NO.</b><br>1501-1257 |                                    |
| <b>APPLICANTS</b><br>Stefan Lindberg, Strangnas, SWEDEN;<br>Hakan Hedlund, Strangnas, SWEDEN;<br>Jim Kummelstam, Strangnas, SWEDEN;<br>Jarl-Ove Lindberg, Strangnas, SWEDEN;<br><br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/SE03/00082 01/20/2003<br>which claims benefit of 60/384,118 05/31/2002<br><br><b>** FOREIGN APPLICATIONS *****</b><br>SWEDEN 0200147-7 01/18/2002<br>SWEDEN 0200215-2 01/25/2002 |   |                                       |  |   |                                    |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and<br>Acknowledged  |   | <b>STATE OR<br/>COUNTRY</b><br>SWEDEN | <b>SHEETS<br/>DRAWING</b><br>15  | <b>TOTAL<br/>CLAIMS</b><br>27               | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>00466  |   |                                       |  |   |                                    |
| <b>TITLE</b><br>Analysis system for analysing the condition of a machine   |   |                                       |  |   |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>1336   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                       | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                    |